

04/24/00  
JCS15  
Application transmittal  
U.S. PTO

04-25-00 A

UTILITY  
PATENT APPLICATION  
TRANSMITTAL  
(only for new non-provisional applications under 37 CFR 1.53(b))

Attorney Docket No. Kaplan

First Named Inventor or Application Identifier Alan Edward Kaplan

Title A Secure Phone Card and Authentication Process

Express Mail Label no. EK508640710US

04/24/00  
JCS15 U.S. PTO  
04/24/00

To: Assistant Commissioner for Patents  
Box Patent Application  
Washington D.C. 20231

APPLICATION ELEMENTS

- Fee Transmittal Form (original and duplicate)
- Specification Total Pages 11  
title  
cross reference to related applications (e.g. provisional application)  
background  
summary  
brief description of the drawings (if filed)  
detailed description  
claims  
abstract
- Drawing(s) Total Pages 2
- Declaration Total Pages 2  
a.  Newly executed  
b.  Copy from a prior application (37 CFR 1.63(d))  
(for continuations/divisionals with section below filled out)  
 Deletion of Inventor(s) Signed Statement attached deleting  
inventor(s) named in the prior application. 37 CFR 163 (d)(2)  
and 1.33(b).
- Incorporation by reference (usable if Declaration is a copy):  
The entire disclosure of the prior application, from which a copy of the oath or declaration  
is supplied, is considered as being part of the disclosure of the accompanying application  
is hereby incorporated by reference herein.
- Other

ACCOMPANYING APPLICATION PARTS

- Assignment  
 Recordation form  
 Power of Attorney  
 Postcard  
 Small entity statement  
 Certified copy of priority documents  
 Information disclosure statement  
 Copies of IDS citations  
 37 CFR 3.73(b) Statement  
 check  
 Other

If CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation  Divisional  Continuation-in-part (CIP) of prior Application No:

CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label (insert Customer No. or Attach bar code label here)  Correspondence Address below

NAME Henry T. Brendzel

ADDRESS P.O. Box 574, Springfield, NJ 07081

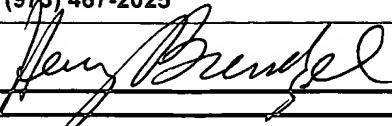
COUNTRY United States

FAX (973) 467-6589

SIGNATURE OF APPLICANT ATTORNEY, OR AGENT

Name Henry T. Brendzel Reg. No. 26,844

Telephone (973) 467-2025

Signature 

Date 4/24/00

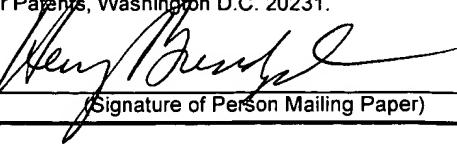
I hereby certify that this Application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington D.C. 20231.

4/24/00

Date of Deposit

Henry Brendzel

(Printed Name of Person Mailing Paper)

  
Signature of Person Mailing Paper)

		Complete if Known	
		Application Number	
		Filing Date	
		First Named Inventor	Alan Edward Kaplan
		Examiner Name	
		Group/Art Unit	
TOTAL AMOUNT OF PAYMENT (\$)		(\$)	730
Attorney Docket ID		Kaplan	

JC511 U  
09/558236 PTO  
04/24/00

METHOD OF PAYMENT (check one)						FEE CALCULATION (continued)	
1. The Commissioner is hereby authorized to charge indicated fees and other underpayments, and credit overpayments to:						3. ADDITIONAL FEES	
Deposit Account Number			Deposit Account Name			Fee Description	
500732			Henry T. Brendzel			Surcharge – late filing fee or oath	
<input checked="" type="checkbox"/> Charge any additional Fee Required under 37 CFR 1.16 and 1.17			<input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance			Surcharge – late provisional filing fee or cover sheet	
2. <input checked="" type="checkbox"/> Payment enclosed:						Non-English specification	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other						For filing request for reexamination	
FEE CALCULATION							
1. FILING FEE							
Fee Description				Fee Paid			
Utility Filing Fee .....				690			
Design Filing Fee .....							
Plant Filing Fee .....							
Reissue Filing Fee .....							
Provisional Filing Fee .....							
SUBTOTAL (1) (\$)				690			
2. CLAIMS							
	Claims remaining	Highest Paid	Extra	Rate	Amount		
Total Claims	14	20	0	18	0		
Independent Claims	3	3	0	78	0		
Multiply Dependent Claims		<input type="checkbox"/>	260		0		
SUBTOTAL (2) (\$)				0			
						Other fee	
						Other fee	
						Other fee	
						SUBTOTAL (2) (\$)	40

SUBMITTED BY					Complete (if applicable)	
Typed of Printed Name		Henry T. Brendzel			Reg. Number	26,844
Signature					Date	4/24/00
					Deposit Account User ID	